2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000065157

Entity Name: TOP QUALITY PRODUCE AND SEAFOOD, INC.

FILED Oct 01, 2004 Secretary of State

Littley Hai		ALITTI NODOCE AND CLAIR	50B, 11 1 0.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1913 NE 1 OCALA, FI	4TH STREET L 34470 U	6			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX OCALA, FI		3	P.O. BOX 5651 OCALA, FL 34478	US	
FEI Number:	: 02-0694968	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
OCALA, FI	TH STREET L 34471 Use named entity		ourpose of changing its register	ed office or registered agent, or both,	
	e of Florida.				
SIGNATUR		nic Signature of Registered Ag	ent	 Date	
Election Car	ce with s. 607.19	3(2)(b), F.S., the corporation did n g Trust Fund Contribution ().	ot receive the prior notice.	SES TO OFFICERS AND DIRECTORS:	
	_				
Title: Name: Address: City-St-Zip:	P (STILES, WILLI 5205 SE 4TH S OCALA, FL 34	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (STILES, HELE 5205 SE 4TH S OCALA, FL 34	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM F. STILES P 10/01/2004